



Nashoba Learning Group Bikeathon Fundraiser Saturday, July 17, 2010

Thank you for agreeing to ride in Nashoba Learning Group's bicycle fundraiser. For record keeping purposes, we need you to complete this entry form, and to read the waiver carefully before signing.

Please either:

1) Enter information into this page and return electronically as a *signed* email to ann.rosas@nashobalearninggroup.org,

or

2) print this page, add your data and mail or fax to:
Ann Rosas
Nashoba Learning Group
10 Oak Park Drive
Bedford, MA 01730
Fax # 781-275-2510

- I will ride the 25 mile route on Saturday, July 17, 2010
- I will ride the 50 mile route on Saturday, July 17, 2010

Last Name	First Name		
Address			
City	ST	ZIP	
Daytime Phone	Evening Phone		
Email	Sex	Age	Date of Birth / /

READ WAIVER BEFORE SIGNING

I know that bicycling is a potentially hazardous activity that could cause injury or death. I should not enter and ride unless I am medically able and properly trained to perform this event and in good health. I agree to abide by any decision of the ride organizers relative to my ability to safely complete the event, including the right to deny or suspend my participation for any reason whatsoever. I assume all risk associated with riding in this event, including, but not limited to, falls, contact with other participants, the effect of the weather, including high heat and humidity, traffic, equipment failures, medical events and the conditions of the road, all such risks being known and appreciated by me. I agree that I will wear an approved helmet at all times that I am riding, and acknowledge that radio headsets are not allowed in the ride and I will abide by this guideline. I understand that the course is challenging and as such, the ride organizers, reserve the right to reject the application of anyone, who in their unilateral judgment, may not be perceived to be able to finish the ride in good health. Having read the waiver and knowing these facts and in consideration of your accepting my application, I, for myself, my heirs and anyone entitled to act on my behalf, waive and release the Nashoba Learning Group, Inc., the Commonwealth of Massachusetts, the towns in Massachusetts through which the ride may cross, and any and all other individuals or organizations assisting at the event, and all sponsors, their representatives and successors from all claims of liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the person named in this waiver. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other recordings, or other record of the event for the legitimate purposes.

X _____
Signature of Participant (or signature of parent/guardian if under 18 years of age)